

<p><i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4618).</i></p> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2009</h3> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p><b>Complete if Known</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Application Number</td> <td>10/584,414-Conf. #9411</td> </tr> <tr> <td>Filing Date</td> <td>February 2, 2007</td> </tr> <tr> <td>First Named Inventor</td> <td>Akio FUNAE</td> </tr> <tr> <td>Examiner Name</td> <td>B. Safaipour</td> </tr> <tr> <td>Art Unit</td> <td>2618</td> </tr> <tr> <td>Attorney Docket No.</td> <td>0757-0316PUS1</td> </tr> </table>		Application Number	10/584,414-Conf. #9411	Filing Date	February 2, 2007	First Named Inventor	Akio FUNAE	Examiner Name	B. Safaipour	Art Unit	2618	Attorney Docket No.	0757-0316PUS1
Application Number	10/584,414-Conf. #9411														
Filing Date	February 2, 2007														
First Named Inventor	Akio FUNAE														
Examiner Name	B. Safaipour														
Art Unit	2618														
Attorney Docket No.	0757-0316PUS1														
TOTAL AMOUNT OF PAYMENT		(\$ ) 130.00													

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	_____
Design	220	110	100	50	140	70	_____
Plant	220	110	330	165	170	85	_____
Reissue	330	165	540	270	650	325	_____
Provisional	220	110	0	0	0	0	_____
							Small Entity Fee (\$)
							_____
2. EXCESS CLAIM FEES							
Fee Description	Fee (\$)	Small Entity Fee (\$)					
Each claim over 20 (including Reissues)	52	26					
Each independent claim over 3 (including Reissues)	220	110					
Multiple dependent claims	390	195					
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>			
_____ - or HP = _____ x _____ = _____				<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
HP = highest number of total claims paid for, if greater than 20.							
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
_____ - or HP = _____ x _____ = _____							
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
_____ - 100 = _____ /50 = _____ (round up to a whole number) x _____ = _____							
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)					<u>Fees Paid (\$)</u>		
Other (e.g., late filing surcharge, 225% Extension for response within first month)					130.00		

SUBMITTED BY		Registration No. 29,680	Telephone (703) 205-8000
Signature	Michael K. Mutter	(Attorney/Agent)	
Name (Print/Type)	Michael K. Mutter	Date	July 31, 2009